

Post 60-Month Intensive Case Management Initiative Request for Proposals (RFP)

TABLE OF CONTENTS

PURPOSE OF FUNDING:	1
BACKGROUND:	2
PROGRAM SCOPE:	2
PROGRAM GOALS AND PERFORMANCE CRITERIA:	3
AMOUNT OF AVAILABLE FUNDING:	4
GEOGRAPHIC SERVICE REGIONS:	5
CONTRACT PERIOD:	6
ELIGIBLE APPLICANTS:	6
APPLICANT QUALIFICATIONS:	6
TECHNICAL ASSISTANCE:	7
TIMETABLE:	9
PROPOSAL PROCESS:	10
NOTIFICATION OF ACCEPTANCE OR REJECTION OF AWARD:	11
APPEAL PROCESS:	11
CONTRACT NEGOTIATIONS:	11
PROPOSAL SELECTION AND EVALUATION CRITERIA:	12
PROPOSAL CONTENT OUTLINE:	14
PROGRAM NARRATIVE REQUIREMENTS:	16

Post 60-Month Intensive Case Management Initiative Request For Proposals (RFP)

PURPOSE OF FUNDING:

The New Jersey Department of Human Services (DHS), Division of Family Development (DFD) announces the availability of grant funding for the Post 60-Month Intensive Case Management Initiative. This Initiative is intended to provide individualized and intensive case management for those Work First New Jersey (WFNJ) Temporary Assistance to Needy Families (TANF) and General Assistance (GA) recipients who have exhausted their receipt of 60 months of cash assistance and are now eligible, due to extreme hardship, for continuing receipt of their full cash assistance benefit for up to 24 months under the Post 60-Month Program. This program is designed to augment, not replace, case management services provided under the WFNJ Program.

The DHS/DFD is soliciting proposals from interested and qualified New Jersey-based for-profit and not-for-profit entities or County Welfare Agencies (CWAs) for the provision of intensive case management services for the WFNJ/TANF or the WFNJ/GA targeted populations. It is to be noted that case managers, currently providing case management services under the WFNJ Program, may not be utilized to provide intensive case management services for this Initiative.

For the purposes of this RFP, intensive case management services to be provided must include, but not be limited to:

- Completing comprehensive/social assessments, with emphasis on identifying mental and physical health related issues;
- Developing individualized service plans;
- Securing and coordinating the delivery of needed services and supports, as identified by the assessments;
- Conducting face-to-face meetings, on a biweekly basis (which shall include, if appropriate, home or work visits); and
- Monitoring and reassessing recipient's needs and progress, as appropriate, but not less than once every three months.

BACKGROUND:

The WFNJ Program initiated in April 1997 set a five-year limit on cash benefits but allowed extensions for some clients and exemptions for others. Research has revealed that recipients who experience difficulties in achieving self-sufficiency, in many instances, have multiple barriers, including but not limited to mental and physical health issues. Recommendations resulting from such research indicate that ongoing assessments, coupled with intensive, affirmative and supportive case management are essential in addressing the changing circumstances and needs of the welfare population.

The DHS has developed the Post 60-Month Program to address the ongoing need for additional intervention for those WFNJ recipients who have exhausted their five-year time limit for receipt of cash assistance. This program will utilize an intensive case management methodology that will offer individualized services and supports in an effort to afford eligible post 60-month recipients every opportunity to successfully transition from welfare to work.

PROGRAM SCOPE:

Grant Recipients selected under this Initiative shall be responsible for providing intensive case management for the targeted population that, at a minimum, shall include:

- Completing a comprehensive/social assessment and evaluation (utilizing the Comprehensive Social Assessment (CSA) form provided by DFD) to determine the individualized service needs of the targeted population to be served;
- Developing an Individual Service Plan (within 20 working days of the recipient's referral to the intensive case management entity) which shall reflect the recipient's functional level, skills, needed services and supports, as determined by the assessment. Pertinent case history obtained from the recipient's case file, provided by the county or municipal agency, shall also be taken into consideration when developing the service plan. Additionally the Grant Recipient will be responsible for documenting, in the service plan, the individual's progress (i.e. the status of the referrals made by the case managers);
- Securing the needed services that have been identified and reflected in the recipient's service plan. The services may include, but are not limited to:
 - Referrals to appropriate entities for mental health screening and services, as needed, such as substance abuse clinical care coordinators (CCC);
 - Referrals to medical entities, as required, to meet the recipient's needs; and
 - Referrals to the New Jersey One Stop Career Center (NJOSCC);
- Providing flexibility in the hours and days of service (e.g., be able to offer non-traditional hours, as well as weekends) in order to accommodate the individual needs of the targeted population;

- Coordinating with the County Welfare Agency/Municipal Welfare Agency (CWA/MWA) for the provision of needed support services, such as transportation, child care, etc., to ensure that the recipient is able to participate/attend the scheduled services/programs;
- Ongoing communication and collaboration with the local CWA, MWA, New Jersey One Stop Career Center, or any other service entity within the selected geographic service region;
- Reviewing compliance and progress at a face-to-face meeting with the recipient every two weeks, and updating/revising the service plan, as appropriate;
- Conducting case conferences, as needed, but not less than every two months, with the CWA/MWA, NJOSCC and any other entity that is currently providing services to the recipient;
- Monitoring and reassessing recipient's needs and progress, as appropriate, but not less than once every three months;
- Notifying the appropriate agencies (i.e., CWA/MWA, NJOSCC) of any status changes, such as change of address, noncompliance, recipient no longer requires intensive case management services, etc.; and
- Submitting, to DFD, monthly program status reports and quarterly fiscal reports, the format of which will be determined at time of contract negotiations.

PROGRAM GOALS AND PERFORMANCE CRITERIA:

The overall goal of this Initiative is to provide intensive case management to assist the targeted population in moving from dependency on cash assistance to self-sufficiency. The Grant Recipient's performance will be evaluated based on the overall effectiveness of the Initiative, including the following minimum standards:

- Providing intensive case management services to all referred recipients (estimated at approximately 25-30 cases per case manager at any given point in time);
- Developing and completing a service plan for each recipient within 20 days of receiving the referral from the CWA/MWA; and
- Reassessing the recipient's progress and ongoing service needs and revising the service plan, as required, but no less than once every three months.

AMOUNT OF AVAILABLE FUNDING:

Funding for the administration and provision of intensive case management services for the stated contract period under this Initiative is comprised of two components:

For WFNJ/TANF - Up to \$3.1 million is available; and

For WFNJ/GA – Up to \$1.5 million is available.

It is anticipated that nine (9) Applicants will be awarded grants, one for each of the identified WFNJ/TANF, WFNJ/GA and combined WFNJ/TANF and WFNJ/GA regions of service (see Geographic Service Regions below).

Applicants opting to apply for grants to serve both the WFNJ/TANF and WFNJ/GA populations in one of the regions of service must submit a distinct and separate proposal for each.

Applicants applying for grant funds to serve one of the combined WFNJ/TANF and WFNJ/GA geographic service regions are required to submit only one proposal.

No funding match is required; however, Applicants will need to identify any other sources of funding, both in-kind and monetary, that will be used.

GEOGRAPHIC SERVICE REGIONS:

WFNJ/TANF REGIONS OF SERVICE

Regional Breakdown	♦Estimated Number of Cases	Maximum Grant Available
Essex	536	\$1,606,715
Bergen, Hunterdon, Morris, Passaic, Somerset, Sussex and Warren	87	\$ 259,768
Mercer, Middlesex, Monmouth, Ocean and Union	73	\$ 218,880
Hudson	289	\$ 868,300

WFNJ/GA REGIONS OF SERVICE

Regional Breakdown	♦Estimated Number of Cases	Maximum Grant Available
Essex	319	\$ 955,656
Bergen , Hudson, Hunterdon, Morris, Passaic, Somerset, Sussex, and Warren	54	\$ 162,622
Mercer, Middlesex, Monmouth, Ocean and Union	48	\$ 142,545

COMBINED WFNJ/TANF AND WFNJ/GA REGIONS OF SERVICE

(Applicants opting to serve either of the designated combined regions below must provide services to both WFNJ/TANF and WFNJ/GA clients for that region.)

Regional Breakdown	♦Estimated Number of Cases	Maximum Grant Available
Atlantic, Cape May, Cumberland and Salem	42	\$ 128,035

♦ Numbers in this column represent the estimated average number of cases per month for the first year of the program. The initial number of clients may be higher than these estimates, but the numbers are expected to fluctuate from month to month as the program progresses.

Burlington, Camden, Gloucester	131	\$ 393,209
--------------------------------	-----	------------

The maximum grant amount per geographic region is based on the estimated number of cases that will require intensive case management services for that region at a maintenance of 25-30 cases per case manager.

CONTRACT PERIOD:

The contract period* is expected to be from October 1, 2003 through September 30, 2004, which may be renewable for a second year.

The Department reserves the right not to issue a grant for a second year under certain circumstances, such as, but not limited to, the unsatisfactory work of the Grant Recipient, failure to meet agreed upon minimum standards, or the failure to submit required documentation in the timeframes requested.

ELIGIBLE APPLICANTS:

Eligible Applicants are New Jersey-based for-profit, not-for-profit agencies and organizations or County Welfare Agencies that can administer and deliver the intensive case management services as stipulated under this RFP.

Note: Case managers, currently providing case management services under the WFNJ Program, may not be utilized to provide intensive case management services for this Initiative.

APPLICANT QUALIFICATIONS:

Each Applicant must be able to:

- Demonstrate knowledge and experience in establishing and administering intensive case management services within the past five years;
- Demonstrate knowledge of the diverse service needs of the targeted population to be served;
- Demonstrate knowledge and experience in identifying and assessing recipients with mental and physical health issues;
- Demonstrate flexibility in the hours and days of service (e.g., be able to offer non-traditional hours, as well as weekends) in order to accommodate the individual needs of the targeted population;

*The actual contract beginning and end dates are contingent upon the Department's Standard Language Document and the Contract Confirmation Letter being fully executed and signed by all appropriate parties (DFD and Grant Recipient).

- Demonstrate experience in establishing strong community linkages, within the geographic region to be served, to meet the diverse service needs of the targeted population;
- Demonstrate the ability to collaborate with local agencies including County/Municipal Welfare Agencies and the New Jersey One Stop Career Centers in the delivery of intensive case management services for the targeted population;
- Demonstrate experience in using effective outreach methodologies to reach and serve the needs of the targeted population within the selected geographic region to be served;
- Demonstrate knowledge and experience in selecting qualified staff (must have a BSW or MSW degree or a BA degree with related experience) that have the necessary skills and experience to provide the required intensive case management services for the targeted population;
- Demonstrate the ability to manage and track recipients referred for intensive case management services and the ability to maintain recipient confidentiality;
- Demonstrate the ability to maintain recipient data in order to prepare and submit timely and accurate reports; and
- Comply with State and Department rules and regulations governing the purchase of service contract process, the Department's Standard Language Document, the Contract Reimbursement Manual and the Contract Policy and Information Manual, in addition to the terms and conditions set forth in this RFP. Grant Recipients are required to comply with the Affirmative Action requirements of Public Law 1975, c.124 (N.J.A.C. 17:27) and the requirements of the Americans with Disabilities Act of 1991 (P.L. 101-336). Applicants must also sign the Statement of Assurances (**ATTACHMENT D**) and the Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion (**ATTACHMENT E**). Applicants may review the Department of Human Services' contracting rules and regulations, as defined in the "Contract Reimbursement Manual" and the "Contract Policy and Information Manual". Copies of these manuals are available in libraries throughout the State. (See the "List of Library Depositories" in **ATTACHMENT G**)

TECHNICAL ASSISTANCE:

The Division of Family Development will conduct a Technical Assistance Conference that will provide information about the Post 60-Month Intensive Case Management Initiative RFP and related proposal procedures.

Attendance at the conference is **MANDATORY**. **A representative of your agency must attend and sign-in at the conference. Proposals submitted by any agency or organization not officially represented at the conference will be considered**

disqualified for funding consideration at time of proposal receipt. At the conference, persons attending who are representing more than one agency/organization **must sign-in separately** for each agency/organization.

The Technical Assistance Conference will provide potential Applicants an opportunity to ask any and all pertinent questions regarding this RFP and receive technical information from DHS/DFD representatives.

NOTE: No further technical assistance on the programmatic aspects of this RFP will be provided after the Technical Assistance Conference is held.

APPLICANTS ARE ASKED TO PRE-REGISTER FOR THE TECHNICAL ASSISTANCE CONFERENCE NO LATER THAN JULY 14, 2003 BY CALLING THE OFFICE OF GRANTS MANAGEMENT AT 609-584-4040 OR BY FAX AT 609-588-7240. (SEE ATTACHMENT J – TECHNICAL ASSISTANCE CONFERENCE PRE-REGISTRATION FORM.) EACH APPLICANT WILL BE LIMITED TO TWO REPRESENTATIVES AT THE CONFERENCE.

If pre-registering by phone, please leave a message on our voice mail that includes your name, agency affiliation, address, telephone number and the number of attendees (maximum of 2 persons). In addition, please advise if special accommodations for someone with a physical disability will be required.

The Technical Assistance Conference is scheduled as follows:

**Place: Burlington County Human Services Facility
795 Woodlane Road
Westampton, NJ 08060**

Date: July 16, 2003

Time: 10:00 a.m. – 1 p.m.

Directions to the Technical Assistance Conference site are provided with this RFP package as *Attachment I*.

TIMETABLE:

Time frames for completion of the RFP process are as follows:

June 16, 2003	Public Notice of Availability of Funds published in the New Jersey Register and distribution of Requests for Proposals packages
July 14, 2003	Deadline Date for Pre-Registration for the Mandatory Technical Assistance Conference
July 16, 2003	MANDATORY Technical Assistance Conference
August 7, 2003 (No later than 4:00 p.m.)	<u>Deadline for Receipt of Grant Proposals</u>
On or After September 22, 2003	Notification of Grant Awards (Subject to Funding Availability)
October 1, 2003	Contract Begins

PROPOSAL PROCESS:

Eligible agencies, organizations, and consortiums interested in applying for these funds must submit **one signed original and seven (7) copies** of the completed proposal document and all support materials to be received by the DFD, Office of Grants Management, **no later than 4:00 p.m. on August 7, 2003**. Proposals may be **mailed or hand delivered** as follows:

US Mail Delivery:

Office of Grants Management
Division of Family Development
PO Box 716
Trenton, New Jersey 08625

or

**Hand Delivery or
Commercial Courier/Mail Service:**

Office of Grants Management
NJ Division of Family Development
Quakerbridge Plaza
Building 3*
Quakerbridge Road
Mercerville, New Jersey 08619

***Only the Building #3 Office of Grants
Management location will be
recognized for proposal hand
delivery or commercial courier/mail
service.**

Directions to Quakerbridge Plaza for proposal hand deliveries are contained in *Attachment H*.

- ♦ FAXED DOCUMENTS/INFORMATION WILL NOT BE ACCEPTED AT ANY TIME.
- ♦ APPLICANTS ARE RESPONSIBLE FOR MAILING AND DELIVERING PROPOSALS **WELL IN ADVANCE** OF AUGUST 7, 2003 AT 4:00 PM TO ENSURE THAT THE PROPOSALS ARE RECEIVED ON TIME.
- ♦ POSTMARKS AND OTHER SIMILAR DOCUMENTS DO NOT ESTABLISH RECEIPT OF A PROPOSAL.
- ♦ PROPOSALS THAT DO NOT MEET THE CRITERIA STATED ABOVE AND ARE NOT RECEIVED BY THE DEADLINE DATE AND TIME ARE DEEMED LATE AND WILL NOT BE CONSIDERED FOR FUNDING.

- ♦ **ANY DOCUMENTS THAT ARRIVE UNDER SEPARATE COVER WILL NOT BE INCLUDED AS PART OF THE PROPOSAL PACKAGE.**

NOTIFICATION OF ACCEPTANCE OR REJECTION OF AWARD:

Applicants will be notified of the award status on or after September 22, 2003. Awards will be contingent upon contract negotiations. Any and all proposals may be rejected when it is in the best interest of the Department to do so.

The Department's best interests include, but are not limited to: loss of funding, inability of the Applicant to provide adequate services, an indication of misrepresentation of information, and/or non-compliance with State and Federal laws and regulations.

The Department also reserves the right to conduct a facility inspection and/or pre-award survey with any individual, agency or organization that submits a proposal in response to this RFP.

All proposals are considered public information and as such will be made available upon request after the completion of the RFP process.

APPEAL PROCESS:

An appeal will not be heard based on a challenge to the evaluation of a proposal.

An appeal of the selection process will be heard only if it is alleged that the DHS/DFD has violated a statutory or regulatory provision in the awarding of a grant. **Applicants requesting an appeal based on a statutory or regulatory violation must submit a written request stating the alleged violation to the Department of Human Services, Division of Family Development, Office of the Director, PO Box 716, Trenton, New Jersey 08625-0716, no later than 10 calendar days following the date of a non-award notification.**

CONTRACT NEGOTIATIONS:

Upon award notification, the Department of Human Services, Division of Family Development will negotiate a contract with the Grant Recipients and proceed with the process of preparing and finalizing formal contracts, as appropriate.

Funding and issuance of this proposed contract is contingent upon the availability of sufficient resources in the Division of Family Development budgets for SFY's 2004-2005. No legal responsibility for payment on the part of DFD shall be made, unless and until funds are made available to DFD from the Legislature and incorporated in the DFD budget for this purpose.

The Department assumes no responsibility or liability for the costs incurred by an Applicant for the planning or preparing of a proposal in response to this RFP.

PROPOSAL SELECTION AND EVALUATION CRITERIA:

A review team of at least three people will review and evaluate each proposal. The review team will consist of staff members of the DFD, DHS, and may include representatives of other State/local agencies and organizations.

Proposals will be rated based on overall proposal content. Applicants are eligible to receive a maximum point score of 100 points. The maximum point score for each proposal section is provided in the Program Narrative Requirements section of this RFP. Proposals receiving an average numerical rating of 65 or less will not be considered for funding.

As an outcome of the team review, a list of recommended proposals, one for each geographic service region, will be submitted to the Director of the Division of Family Development and the Commissioner of the Department of Human Services for final approval. During the selection process, additional information may be requested by the DHS/DFD.

Proposal Selection Criteria:

- Knowledge of the geographic region to be served and the diverse service needs of the targeted population within that region;
- Experience and effectiveness in establishing and administering intensive case management services within the last five years;
- Knowledge and experience in identifying and assessing recipients with mental and physical health related issues;
- Effectiveness of the Applicant's outreach plan for reaching and serving the individualized needs of the targeted population;
- Ability to provide flexible hours and days of service (e.g., be able to offer non-traditional hours, as well as weekends) in order to accommodate the individualized needs of the targeted population;
- Experience of the Applicant in developing collaborative relationships and working with other community resources such as county/municipal welfare agencies, New Jersey One Stop Career Centers, etc.;
- Experience, qualifications and skills of the staff selected by the Applicant to provide the required intensive case management services;
- Effectiveness of the overall proposed program as it relates to meeting the goals and performance criteria set forth under this RFP;

- Attainability of the Applicant's objectives for this Initiative;
- Effectiveness of the management plan;
- Compliance with the criteria contained in this RFP; and
- Feasibility and reasonableness of the proposed budget as it relates to the proposed program.

PROPOSAL CONTENT OUTLINE:

Applicants must submit **one signed original and seven (7) copies** of the complete proposal package.

Failure to submit a signed original and the required number of copies will result in the proposal not being considered for funding (disqualification). Note: It is recommended that a blue ink pen be used for all required signatures in order to differentiate the original from the copies.

All proposals submitted for consideration must:

- Be securely fastened; and
- Include all of the following items in the order stipulated;

**1. PROPOSAL/AUTHORIZATION COVER SHEET (ATTACHMENT A)
(SIGNATURE REQUIRED)**

2. BUDGET (ATTACHMENT B)

3. CHECKLIST (ATTACHMENT C)

4. TABLE OF CONTENTS

5. PROGRAM NARRATIVE: All narrative information provided for Sections I through VII below must not exceed ten (10) single-spaced, one-sided pages. Applicant may not use a type font lower than 12 point.

- I. Agency Overview**
- II. Service Goals and Objectives**
- III. Program Approach**
- IV. Management Plan**
- V. Service Coordination/Collaboration**
- VI. Timetable**
- VII. Budget**

**6. STATEMENT OF ASSURANCES (ATTACHMENT D)
(SIGNATURE REQUIRED)**

**7. CERTIFICATION REGARDING DEBARMENT, SUSPENSION, INELIGIBILITY AND VOLUNTARY EXCLUSION (ATTACHMENT E)
(SIGNATURE REQUIRED)**

8. LETTERS OF SUPPORT AND/OR COLLABORATION FROM COUNTY/MUNICIPAL WELFARE AGENCIES AND NEW JERSEY ONE STOP CAREER CENTERS.

9. OTHER REQUIRED DOCUMENTS

- Copy of the Applicant's organizational chart
- Copy of the most recent organization-wide audit report or financial statement **(original proposal only)**
- Agency's Code of Ethics/Conflict of Interest Policy (Must reflect policy of Applicant Agency. **Attachment F is provided only for guidance.**)
- List of the Board of Directors, Officers and their terms **(not-for-profits only)**
- Charitable registration status **(not-for-profits only)**
- Evidence of not-for-profit status (in accordance with Section 501(c)(3) of the Internal Revenue Code)
- Applicant's Certificate of Incorporation
- Letter(s) of support from other community entities and social service agencies, as available

PROGRAM NARRATIVE REQUIREMENTS:

I. Agency Overview (10-point maximum)

- a. Describe the Applicant's history, mission and goals and how they relate to the administration of the Post 60-Month Intensive Case Management Initiative.
- b. Describe the Applicant's experience, within the last five years, in providing intensive case management services and support to welfare recipients.
- c. Specify contracts that the Applicant has/had with DHS and/or other State departments for case management types of services. Provide, as an attachment, a final or interim report showing performance for each contract specified.

II. Service Goals and Objectives (10-point maximum)

Identify the Applicant's proposed objectives to meet the overall goal of providing intensive case management services to assist the targeted population in moving from dependency on cash assistance to self-sufficiency.

III. Program Approach (30-point maximum)

- a. Specify the location(s) of the office(s) that will be utilized by the intensive case manager(s) and indicate the hours and days the proposed services will be available.
- b. Describe the intake and comprehensive needs assessment processes, including how the Applicant will assess the recipient's functional level, skills, needed services and supports.
- c. Describe how the Applicant will develop the Individual Service Plan within 20 working days of the recipient's referral from the CWA/MWA to the intensive case management entity.
- d. Describe how the Applicant will assist the recipient in complying with the developed Individual Service Plan, including, but not limited to, coordinating support services, providing specific guidance relating to scheduled referrals to appropriate mental/medical health entities, treatment programs, doctor's offices, NJOSCC, or any other related services that may be needed.
- e. Describe the follow-up procedures that will be utilized to ensure that the recipient is successful in completing the steps outlined in his/her service plan. Include frequency of face-to-face contacts, methods of contact, and the corrective action procedures that will be utilized, when necessary.
- f. Describe how the Applicant will monitor and reassess the recipient's needs and update or revise the recipient's service plan.

- g. Indicate how the Applicant will record and report recipients' progress, compliance and status changes to the CWA/MWA, as appropriate, and the means by which the Applicant will maintain confidentiality of recipients' records.
- h. Describe any specific methods the Applicant will use to address the cultural diversity within the population to be served.

IV. Management Plan (20-point maximum)

- a. Attach a copy of the Applicant's table of organization and explain how the Post 60-Month Intensive Case Management Initiative will be incorporated into that structure.
- b. Indicate the number, job titles, qualifications, responsibilities and skills of the staff to be utilized for this Initiative. Attach copies of job descriptions or resumes, as appropriate.
- c. Describe the management and supervision methods that will be utilized in the operation and oversight of this Initiative to ensure that the goals, objectives and performance requirements are met.
- d. Describe how the Applicant will maintain the needed data for the preparation of monthly program status and quarterly fiscal reports to DFD.

V. Service Coordination/Collaboration (15 point maximum)

- a. Identify the community resources, such as, social service agencies, medical services, mental health entities, etc. that will be utilized to meet the individualized service needs of the targeted population. Attach letters of support, as available.
- b. Describe how the Applicant will work with CWAs and/or MWAs, as well as the NJOSCC in the geographic region to be served. Include letters of support/collaboration.

VI. Timetable (5 point maximum)

Based on the parameters set forth in this RFP, provide a timetable for implementation of the Post 60-Month Intensive Case Management Initiative.

VII. Budget (10 point maximum)

- a. Provide a brief narrative that explains how the costs in the budget forms **(ATTACHMENT B)** were derived and how they relate to the proposed project. Show a clear link between the services, the core components, and the proposed spending plan.
- b. Indicate any other funding or in-kind services that will be utilized in combination with the grant funding, if applicable. (Identify the sources.)